

2024-25 Parent Contract

Child's Name:	Date:
First Day of Care:	Expected Hours of Attendance:
Program Options:	
☐ Before School Care	\$70/week (Monday-Friday 6:30am - bus pick-up)
☐ After School Care S	\$70/week (Monday-Friday bus drop-off - 6:00pm)
☐ Before and After Scl	hool Care \$125/week (6:30am-6:00pm)
Please initial the following	<u>ng:</u>
I have received a	copy of the 2024-25 Kid City Parent Handbook.
I have read and u	nderstand the discipline and screen time policies of Kid
City.	
I have read and u	nderstand the tuition and billing policies of Kid City.
I have read and u	nderstand the guidelines specific to COVID-19.
I have been inform	med that a copy of the "Parent's Guide to Childcare" is
posted in the lobby of Kid	City.
☐ I <i>give</i> Kid City permi	ssion to photograph my child for use on Kid City's
social media platfor	ms for promotional purposes.
☐ I do not give Kid City	y permission to photograph my child for use on Kid
City's social media p	olatforms for promotional purposes.
Print Parent/Guardian Nar	ne:
Parent/Guardian Sianatur	e: Date: